

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-6-14)

(CFA-4)

Summary Sheet

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT
6

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1. Full Name of Committee (so on Statement of Organization) Check If this is a new name CONTER Committee Committee	IS THIS AN AMENDMENT? Yes No			6
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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) **CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200 if regular party committee). All cumulative receipts, (such as ban proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMBER	
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CONTRIBUTOR S FULL NAME AND OCCUPATION FULL MALING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER REGERAT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. VARIOUS MISC CONTRIBUTORS UNDER \$100.00 Contributor's Occupation (# required)	Contributions: Direct In-Kind (describe) Other Receipts: Inferest Loan Misc. (specify)	¥ 100.00	500.00	8-1-09 12-1-09 CKnight
LAWRINCO, Scott 4000 E EVANS Terre Haute, In 47805	Contributions: Y Direct In-Kind (describe)	500.00	500.00	8-409 CKnight
contributor's Occupation of required Consultant. 3 Mery Jaying Use Jaying Terre Haute For. Contributor's Occupation of required retired	Contributions: V Direct In-Kind (describe)	300.00	300.00	9-1-09 CKnight
Professional Security 3810 E 88th Terre Haute, In 47805 Contributors Occupation of required.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	700.00	700.00	9-1-09 J. Trotter
Jeff Trotter 3810 E 88 th Terre Haute, In. Contributor's Occupation of required Police Officer	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	100.00	100.00	8-1-09 J. Tratter
SUBTOTAL T TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM		\$ 1700.00		



(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as boan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year. MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER	
Page	of	

CONTRIBUTOR S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZiP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	GOLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
NAtalie Trotter	Contributions:			8-1-09
700 8 654	PAYMENT For said			12-31-00
Terre Haute, In. 47805	Other Receipts:	1027.52	1027.52	VACIOUS
	Misc. (specity)			Vendors
Contributor's Occupation of required photographen	to be reimbuist	7		
2	Contributions: Direct			
	In-Kind (describe)			
	Other Receipts:			
	☐ Misc. (specify)			
Contributor's Occupation (if required)				
3.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
Contributor's Occupation (if required)			i	
4	Contributions:			
	Direct			
	in-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	☐ Misc. (specify)			
Contributor's Occupation (if required)		.,		
5.	Contributions:			
	In-Kind (describe)			
			}	}
	Other Receipts:		i	
	☐ Interest ☐ Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
	HIS PAGE OF SCHEDULE A	4027.52		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$2727.52		
	7,711000	<u></u>		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures <u>totated on ITEM 17a</u> of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

	FILE N	UMBER	
Page	1	of 2	

RE JOHN'S NAME AND MAI INC ADDRESS (street number city state ZIP code)	PECHENTS OF SPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and FURPOSE (be specific)	COLUMNIA AMOUNT 111S PERIOD	BINVESOC EVELATIVE SAFE OF PASE	BATEON Expendition
			,		
Code C WABASA		Direct In-Kind Payment of Debt			
VAILEY CENTRAL LABOR		Returned Contribution	300.00	300.00	8.31-09
Concil 131/2 S 13 Terre Haute		Purpose:			0 0,0,
code C St. Patrick		Direct In-Kind			
Church RAFFIE		Payment of Debt Returned Contribution	300.00	300.00	10-3-09
		Other	300.00	300.00	10.3.07
Terre Haute, In.		Purpose: Raftle for Chai	CH		
Code A		Direct In-Kind			8-1-09
Kroger's Groc.		Returned Contribution			thr
Terre Haute, In.		Other Purpose:	234.54	236.54	12-31-0
<i>a</i> 1					1 2-31-0
Code A		Direct ☐ In-Kind ☐ Payment of Debt			8-1-09
Deans Panty Mania		Returned Contribution	191. 24	196.24	thru
Terre Haute, In		Purpose:	774.29	140.29	12-31-09
Code A		Direct In-Kind			8-1-09
Sam's Club		Payment of Debt Returned Contribution			thru
 		Other	232.14	232. 14	12-31-09
terre Haute, In		,			12-31-01
Code (C.		Direct In-Kind Payment of Debt			8-1-09
Spring hill wholesale		Returned Contribution	123.05	123.05	thry
,		Purpose:	123.00	,	12-31-09
Terre Haute In		F Cornet D to Kind			
Code O		Direct In-Kind Payment of Debt			8-1-09
Pizza City		Returned Contribution Other	1.5 80	115.89	TNC4
Terre Hante, In		Ригрозе:	113.67		12-31-09
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$ /503.86		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE	LAST PAGE ONLY	\$ -		
L	(Enter total on ITEM 17a of t	ne Summary Sheet)			



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in complete schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$1 recipient, within a calendary year MUST be itemized on this schedule (over \$200, if regular party committee). All cum expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legicaucus, political action, or regular party committees) MUST be itemized on this schedule.

ting this a of the	FILE NUMBER
100 per mulative gislative	

BECOMEN'S NAME AND MACING ADDRESS	FENDENIS OF BURNING	TYPE OF EXPENDITURE	COLUMN A	COLUAN R	OATE OF
(street number city state ZIP code)	OFFICE SOUGHT (fappileable)	and PuRPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR TO DATE	EXPENSITURE
Misc expenditure under \$100.00		Direct In-Kind Payment of Debt Returned Contribution Other	62 71	83.7/	8-1-09 + mru
WANCE TO STATE		Purpose:	83.71	8 3. 77	12-31-09
Code		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Othes Purpose:			
	SUBTOTAL THIS PAG		\$83.71		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of t	LAST PAGE ONLY the Summary Sheet)	\$1587.57		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	FILE	NUMB	ER	
Page	/_	of	1	

** STEEL OF SOME ENDER SINAME 8 MAKING ADDRESS **Street, number city state 7IP code;	ENDIFISEL SIGNIFICALS NAME & MANING ADDRESS of anyoistical number city state ZiP code;	AMCUNT NATURE OF DEBIT	DATE DEBT INCURRED	SVITAJUMBO GLAG STAG OF FASY	OUTSTANDING BALANCE THIS PERFOLD
TABCO Business P.O. Bon 3400		3760.59	8-1:09 Thru	610 115	2941.14
Terre Haute, In. LENDERS COCUPATION 47803	SAME	Sign and Otherelection programs	12-31-09	8.7.43	3941.19
NATALLE Trotter 3810 E. 88		1027.47	8-1-09		
Terre Haute, In	SAME	payment of Various exp.	12-31-09		1027.52
LENDER'S OCCUPATION:	-				
LENGER'S OCCUPATION					
LENGER'S OCCUPATION:	11.				
LENGER'S OCCUPATION					
LENDER'S OCCUPATION:		SUBTOTAL	THE DAGE :	COLUMN	
	TOTAL OF ALL	PAGES OF SCHEDULE (Enter total on I)	DON THE LAS	SCHEDULE D T PAGE ONLY Jummary Sheet	* 3968.66 * 3968.66